File with:

lowa Ethics and Campaign

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Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 FOR INSTRUCTIONS, SEE BACK OF FORM Fax: 515-281-4073 DISCLOSURE SUMMARY PA PM 3: 26 COMMITTEE NAME (Must be same as on Statement of Organization) **FORM** DR-2 DISCLOSURE IMPORTANT: Indicate by # type of committee you are reporting for: (Rev. 07/2007) REPORT (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC ( For Office Use Only 11 ) Local Ballot Issue Comm. # CANDIDATE COMMITTEES ONLY: Logged In Candidate Name Political Party (if applicable) Scanned  $\mathbf{W}_{i}$   $\mathbf{N}$ Democrat Computer District (if Senate or House) Audited Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. Indicate by # | i □CHECK IF AMENDMENT TO REPORT DATED Local Committees, enter Date of Election 2008 Novem ☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. County & Local Committees, enter County in (You must continue to file reports until a DR-3 is filed.) which Election is held POLK STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) ......\$ ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... Schedule F: Loans Received total (Attach Schedule F)..... Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)...... NIA Schedule F: Loan Repayments total (Attach Schedule F)..... CASH ON HAND at the end of this reporting period (if final report balance must be zero) ......\$ \*\*UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ \*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$ \*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

**CONSULTANT BREAKDOWN (Schedule G Attached?)** 

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

**CANDIDATE COMMITTEES ONLY:** 

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**CONTRIBUTIONS -- MONEY TAKEN IN** 

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

McCarthy For Sheriff

SCHEDULE

A
(Rev. 07/03)

MONETARY
RECEIPTS

CHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
1/04/08	3910	John m. morrissey 2913 Oxford Desmoines IA 50313		\$100.00	
1/04/08	ID# CK#	Benjamin Washburn 120 S.W. 5th ST. Unit 602 Desimplines, TA 50309		100.00	
الاعادة	<sup>ск#</sup> 4210	AMA Kingery 4th St. 1622 N.W. 74th St. Ankeny IA 50021		100.00	
1/14/08	CK#   600	Charles Gunl 1707 E. 31ST Ct. Des Moines, IA 50317		150.00	
1/23/08	ск# 97 <i>55</i>	James Contin 2900 Southern Hills Circle Desmoines TA 50321		2,500.00	
2/05/08	ск# 2067	Paul Schlotterbeck 4100 Greenview Dr. Urbandale IA 50322		100.00	
2/05/08	<sub>ск#</sub> 1128	Brandon A'RNOID  ab34 E. Titus Ave.  Desmoines IA 50320		100.00	
2105108	11992	Barry Arnold 2634 E. Titus Desmoines IA 50320		100.00	
2/23/08	ск# Э961	Michael Kiernan 750-16th ST. Desmoines IA 50314	-	250.00	,
2123108	<sup>СК#</sup> 4282	Kimberly Randabaugh 5045. W. maplewood DR. GRIMES, TA 50111		25.00	
		•	SUB-TOTAL	35500	

TOTAL (if last page of this schedule)

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

## For Instructions, See Back of Form

## **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

Reset Form

SCHEDULE **MONETARY** (Rev. 07/03) **RECEIPTS** 

> CHECK THIS BOX IF AMENDING FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
,	NUMBER		(и срриссия)		INCOME
2-27-08	<sup>ск#</sup> 7 857	VINCENT VAI DEZ 1408 PIERSANT DR. WEST DES MOINES IA 50265		\$ 700,00	
2-27-08	ck# 9́а/"5	William Lillis 3000 PATRICIA DR. Desmoines IA 50322		500,00	
2-27-08	CK# 1145	LINOA CARTER LEWIS 3141 S.W. 38th Pl. DES MOINES IA 5-0321-149	59	100,00	
3-01-08	<sup>ск#</sup> 2844	SCOTI REd'linger 4634 Coachlight DR. West Desmaires, IA 50365		250.00	
3-03-08	2469	Leesa Shoemaker 126 DAVIS ST. POLK CITY, IA 50226		500.00	
3-10-08	ID# Ск# 4008	Michael Hansen 4000-46th St. Desmoines TA 50310		100.00	
3-12-08	CK# CASH	JAM KALAINOV 3131 FLEUR DR. #1002 Des Moines, TA 50321		100.00	
3-12-08	ID# Ск# 4676	John Shor's 2950 S.W. 30th St. Desmoines IA 50321		100.00	
3-17-08	ок# Ск# 11715	Wade Johnson 4225 Woodlawn DR DESMOINES IT 50012		50.00	
3-21-08	id# ck# Д688	James Daie 1304-6th Ave. S.E. NI toona JA 50009		100.00	
			SUB-TOTAL	- (2.000, 60	

TOTAL (if last page of this schedule)

(for Schedule A)

\$2000.

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of F	Form
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## **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
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STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
4-14-08	ID# Ск# 7718	VIC MUNDZ 4111 E MADISON AUR. DESMOINES, IA 50317		\$ 360.00	
4-25-08	6433	MARYlyn BRUCE 833 Warker St. Desmoines, IA 50314		25.00	
	ID# CK#	•			
	ID# CK#				
,	ID# CK#				
	ID# CK#				
	ID# CK#				
		· · · · · · · · · · · · · · · · · · ·	SUB-TOTAL	20 ( 00	

TOTAL (if last page of this schedule)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

COMMITTEE NAME (Must be same a	s on Statement	of Organization)	
McCARthy	FOR	Sheriff	
NOTE: 5 11 11 11 11 11 11 11 11 11 11 11 11 1			

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

SCHEDULE					
D	INCURRED				
(Rev. 08/98)	INDEBTEDNESS				
1 —	☐ CHECK THIS BOX				
IF AI	IF AMENDING				
FORM					

## DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

		Tida bee	n receivea.
DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
11/17/07	William Me Carthy (self)	stamps for 11/29 fundraiser + inv.tations	\$ 244.50
11/14/07	William Mc Carthy (self)	Typing fee and labels cost to MARK Langgin	230.00
11/21/07	William McCarthy (self)	PRINTING OF Letters and Fundraiser invites	124.02
12/03/07	William Mc Parthy (Self)	Purchase of thank you note cords	8, 42
12107/07	William McCarthy (self)	1 roll Stamps for thank yous	41.00
12/09/07	William McCarthy (self)	Stamps 3 pkgs a 8.15ea	<i>34.45</i>
12/13/07	William Mc Carthy (self)	computer printer	30.29
	TOTAL DEBTS OWED BY COMMITTEE AT T	SUB-TOTAL  HE END OF THIS REPORTING PERIOD	\$ 702.68 \$

\*If actual figure is unknown, show "estimated" beside the figure.

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CANDIDATE COMMITTEES NOTE:

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

COMMITTEE NAME (Must be same as on Statement of Organization)

NOTE: Debts p	previously reported that remain unpaid must be included on this ule, as well as any new obligations incurred in this period.	Reset Form	CHECK THIS BOX IF AMENDING FORM
DEBTS/OBI (DO NOT IN	An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.		
DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS ( SERVICES PROVIDED OF PURCHASED	
2/19/07	William Mc Carthy (sex)	stamps	14.76
1,6108	William Mc Carthy Bell	Photo of ) self-siming f w Photo. Stub.	ee 53.00
-			
		SUB-1	FOTAL \$ 67.76
	TOTAL DEBTS OWED BY COMMITTEE AT T	HE END OF THIS REPORTING PI	\$ 770.44
factual figure is	unknown, show "estimated" beside the figure.		Page of

SCHEDULE **D** 

**INCURRED** 

(Rev. 08/98) INDEBTEDNESS

**CANDIDATE COMMITTEES NOTE:** 

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